

Sunday School Registration Form

SUNDAY SCHOOL Registration / Emergency Information

Student Information	First Name	Middle Name	Last Name	Address	Age	Birthdate	Grade

Medical Information	Concerns Restrictions	Allergies- Food & Other	Medications

Parent Information	Mother's First Name	Mother's Middle Name	Mother's Last Name	Address (If different from above)	Home Phone Number	Cell Phone Number	Email address for Sunday School newsletters & updates

Parent Information	Father's First Name	Father's Middle Name	Father's Last Name	Address (If different from above)	Home Phone Number	Cell Phone Number	Email address for Sunday School newsletters & updates

Emergency Contact (Other Than Parents)	First Name	Middle Name	Last Name	Home Phone Number	Cell Phone Number

As a parent/guardian of a participant in Bethany United Methodist Church Sunday School program, I covenant to do the following –

bring my child faithfully to Sunday school, and will be committed to serving God and Bethany UMC with my time, prayers, presence financial gifts, service, and witness.

Parent / Guardian Signature

Date